

**SAN JOSE/SANTA CLARA WATER POLLUTION CONTROL PLANT
TEMPORARY DISCHARGE PERMIT APPLICATION**

For San Jose/Santa Clara Water Pollution Control Plant Use Only

Company Name: _____ **City:** _____

Date Received: _____ **Amount Paid: \$** _____ **Receipt #:** _____

COMPANY INFORMATION

(Please type or print legibly)

Company Name: _____

Business or Property Owner: _____

Phone Number: _____

Business Address: _____

Discharge Address: _____

Contractor's Name: _____

Contractor's Address: _____

Principal Contact: _____

Contact's Phone Number _____

Fax Number _____

Cell Phone/Pager Number _____

e-mail address _____

CERTIFICATION STATEMENT

“I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment for knowing violations.”

CERTIFIED BY:

Name

Title

Signature

Date

PREPARED BY:

Name

Title

Signature

Date

NATURE OF PROJECT

Description of Project: Include all sources of the wastewater, potential pollutants, what type of pretreatment will be used, if any, and the method of disposal. Attach additional sheet(s) as necessary. (Attach any sample results that you have.)

Regulator Agency Coordination: List all regulatory agencies, individuals, and phone numbers contacted in coordination with this project.

Duration of Project: How long will this project take to complete? What is the planned start and end date?

Method of Discharge: Will this be a continuous or batch discharge? Detail the proposed schedule, method and rate of discharge (example: One 50 gallon batch discharge per day, at 50 gpm, 3 days per week; **or** a continuous discharge for 12 hours/day at 20 gallons/minute for two consecutive days).

Treatment Systems: Detail any treatment systems (include drawings) that you intend to use. Discharges may require a sample point and or an effluent flow meter.

Location of the Proposed Discharge Point (attach a diagram or a map of the site and show the location of any manholes and the routing of discharge piping.):

If the project involves groundwater remediation, or the clean-up of any water that may have been allowed to be discharged to the storm drain, was an attempt made to obtain a NPDES permit for this discharge? If not, why not? *(If you have a letter from the San Francisco Bay Regional Water Quality Control Board denying discharge to the storm system, please include a copy of that letter with this application.)*

WASTEWATER CHARACTERISTICS

Contact an Environmental Inspector at (408) 945-3000, to determine what pollutants of concern should be included in the laboratory analysis. Please attach the original laboratory analysis, chain of custody and all QA/QC, from a state wastewater certified lab, to this application.

PERMIT FEE AND DURATION

A short term permit is valid for a period not to exceed one (1) year from the effective date; at a cost of \$560. Make all checks payable to the "City of San Jose". Mail applications to; Environmental Services Department, Source Control, 170 W. San Carlos Street, San Jose,

CA., 95113. If a project must be extended, then a new permit application along with the appropriate fee, must be submitted prior to the expiration date of the original permit. All discharge(s) covered in the previous permit must cease when a permit expires, and cannot resume until a new permit is issued.